POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	_Cmy_	_6814_	_5/3/00_
O.I.P.E. CLASSIFIER		8	5-9-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		_4434_	_9/00_
		_7147_	_6/29_

INDEX OF CLAIMS

✔	Rejected	N		Non-elected
=	Allowed	~		Interference
–	(Through numeral)... Canceled	A		Appeal
÷	Restricted	O		Objected

Claim		Date		Claim		Date		Claim		Date
Final	Original			Final	Original			Final	Original	
1	1				51				101	
2	2				52				102	
3	3				53				103	
4	4				54				104	
5	5				55				105	
6	6				56				106	
7	7				57				107	
8	8				58				108	
9	9				59				109	
10	10				60				110	
11	11				61				111	
12	12				62				112	
13	13				63				113	
14	14				64				114	
15	15				65				115	
16	16				66				116	
17	17				67				117	
18	18				68				118	
19	19				69				119	
20	20				70				120	
21	21				71				121	
22	22				72				122	
23	23				73				123	
24	24				74				124	
25	25				75				125	
26	26				76				126	
27	27				77				127	
	28				78				128	
	29				79				129	
	30				80				130	
	31				81				131	
	32				82				132	
	33				83				133	
	34				84				134	
	35				85				135	
	36				86				136	
	37				87				137	
	38				88				138	
	39				89				139	
	40				90				140	
	41				91				141	
	42				92				142	
	43				93				143	
	44				94				144	
	45				95				145	
	46				96				146	
	47				97				147	
	48				98				148	
	49				99				149	
	50				100				150	

If more than 150 claims or 10 actions
staple additional sheet here

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